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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Patent No. : 6,572,952
Patent App. No. : 09/617,206
Inventor: : Ray D. Kanter
Issue Date : June 3, 2003
Title : SHOCK ABSORBING CARPET SYSTEM
Examiner : Nasser Ahmad
Docket No. : 114510.010100/US-F004

**REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY
AND CHANGE OF CORRESPONDENCE ADDRESS
AND "FEE ADDRESS" INDICATION FORM**

Commissioner for Patents
P.O. Box 1450
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Fax No.: 571.273.9900

Dear Sir:

Please find the enclosed revocation of power of attorney with a new power of attorney and change of correspondence address. This document revokes all previous powers of attorney and grants power of attorney those practitioners associated with Customer Number 70-155, including the undersigned attorney. Kindly direct future correspondence to the address associated with Customer Number 70-155.

Also enclosed is a "fee address" indication form, which kindly requests all future fee notices be directed to the address associated with Customer Number 70-155.

Applicant does not believe any additional fees are necessary for this Preliminary Amendment, however, in the event that any fees are due, the Commissioner is authorized to

charge any fees which may be required, (or credit any overpayment) to Account No. 50-2638,
Order No. 114510.010100/US-F004.

Respectfully submitted,

Date: 9/24/2008

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**POWER OF ATTORNEY
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WITH A NEW POWER OF ATTORNEY
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CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/617,206
Filing Date	July 17, 2008
First Named Inventor	Ray D. Kanter
Title	SHOCK ABSORBING CARPET SYSTEM
Art Unit	1772
Examiner Name	Heather Edwards
Attorney Docket Number	11-4510.010100/15-P006

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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I am the:

☒ Applicant/Inventor.

OR

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/88/66) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

Signature

Name

Title and Company

Date

Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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